

HOUSE JOINT MEMORIAL 60

49TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2009

INTRODUCED BY

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A JOINT MEMORIAL

REQUESTING THE DEPARTMENT OF HEALTH TO FORM A TASK FORCE TO
DEVELOP AND DISSEMINATE WRITTEN INFORMATIONAL MATERIALS
REGARDING THE NECESSARY CARE AND SUPPORT OF PRETERM INFANTS.

WHEREAS, most pregnancies last about forty weeks, which is
considered full-term; and

WHEREAS, babies that are born before thirty-seven
completed weeks of pregnancy are called premature, or preterm;
and

WHEREAS, according to department of health statistics for
2005, more than one in ten births were considered preterm; and

WHEREAS, the rate of preterm births in New Mexico was
eleven percent of live births in 2005, and eleven and
two-tenths percent in 2006; and

WHEREAS, the rate of late preterm births, which are those
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1 births occurring between thirty-two and thirty-six weeks
2 gestation, was seven and eight-tenths percent in 2006; and

3 WHEREAS, New Mexico is making progress in addressing
4 preterm births and in providing services to pregnant women to
5 decrease this rate; and

6 WHEREAS, according to the march of dimes, premature birth
7 is a serious health problem, and preterm infants are at
8 increased risk for newborn health complications as well as
9 lasting disabilities, such as mental retardation, cerebral
10 palsy and lung and gastrointestinal problems; and

11 WHEREAS, preterm infants are more subject to
12 hospitalization for such conditions as bronchiolitis,
13 dehydration, jaundice and pneumonia; and

14 WHEREAS, the estimated medical, educational and lost
15 productivity costs associated with preterm births in the United
16 States was twenty-six billion dollars (\$26,000,000,000) in
17 2005; and

18 WHEREAS, preterm deliveries often result in low-birth-
19 weight babies, weighing less than five pounds; and

20 WHEREAS, low birth-weight is often associated with the
21 development of diabetes and other chronic diseases later in
22 life;

23 NOW, THEREFORE, BE IT RESOLVED BY THE LEGISLATURE OF THE
24 STATE OF NEW MEXICO that the department of health be requested
25 to form a task force to develop and disseminate written

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1 informational materials regarding the necessary care and
2 support of preterm infants; and

3 BE IT FURTHER RESOLVED that the task force include
4 representation from the human services department, the
5 children, youth and families department, hospitals, primary
6 care clinics, community health councils and other health
7 facilities and providers; and

8 BE IT FURTHER RESOLVED that the materials to be developed
9 take into consideration appropriate literacy levels, cultural
10 considerations and language barriers; and

11 BE IT FURTHER RESOLVED that the materials to be developed
12 address possible complications of preterm births and proper
13 care and support for preterm babies, including specific
14 information regarding the following:

15 A. the unique health issues affecting preterm
16 infants, such as the increased risk of developmental delay,
17 nutritional challenges and special feeding needs, infection,
18 vision and hearing impairment, jaundice, hyperactivity and
19 respiratory problems;

20 B. the proper care of preterm infants, including
21 developmental screening and available health and support
22 services;

23 C. the importance of preventive measures such as
24 vaccinations;

25 D. the leading causes of hospitalization and

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1 factors contributing to increased morbidity and mortality of
2 preterm infants; and

3 E. the emotional and financial challenges faced by
4 parents and families of preterm infants, and resources
5 available to support them; and

6 BE IT FURTHER RESOLVED that the task force rely on
7 organizations and individuals with expertise in caring for
8 preterm infants in developing the materials; and

9 BE IT FURTHER RESOLVED that the task force review and
10 evaluate existing materials developed by pharmaceutical and
11 biomedical companies; and

12 BE IT FURTHER RESOLVED that the materials developed by the
13 task force be distributed to medicaid providers, hospital
14 neonatal intensive care units, pediatric intensive care units,
15 maternal and child care providers, general hospitals and other
16 entities determined by the task force to be appropriate to
17 ensure that parents or guardians of preterm infants benefit
18 from the materials; and

19 BE IT FURTHER RESOLVED that copies of this memorial be
20 transmitted to the secretaries of health, human services and
21 children, youth and families.